Case 17-15850 Doc 1 Filed 05/22/17 Entered 05/22/17 16:59:55 Desc Main Document Page 1 of 50

| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | t 1: Identify Yourself | | |
|-----|--|---|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. | Rosanna First name M Middle name Hartman Last name and Suffix (Sr., Jr., II, III) | First name Middle name Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-2901 | |

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Debtor 1 Rosanna M Hartman

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 2870 S. Craig Dr. Des Plaines, IL 60018 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for

bankruptcy

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case number (if known)

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Case number (if known) Debtor 1 Rosanna M Hartman

| ar | Tell the Court About | Your E | 3ankruptcy Ca | ise | | | | | | |
|-----|---|---------------|-------------------------------|---------------------------------------|---|----------------------------------|---|--|---|----|
| 7. | The chapter of the Bankruptcy Code you are | Ched (Fori | | | n of each, see <i>N</i> o of page 1 and ch | | d by 11 U.S.C. § 342(b) priate box. | for Individuals Fi | ling for Bankruptcy | |
| | choosing to file under | Chapter 7 | | | | | | | | |
| | | | Chapter 11 | | | | | | | |
| | | | Chapter 12 | | | | | | | |
| | | | Chapter 13 | | | | | | | |
| 3. | How you will pay the fee | • | about how yo | u may pay. Ty attorney is sub | pically, if you are | paying the fe | check with the clerk's of the yourself, you may pay behalf, your attorney m | y with cash, cash | ier's check, or money | |
| | | | | | stallments. If you | | option, sign and attach | the <i>Application fo</i> | or Individuals to Pay | |
| | | | but is not requapplies to you | uired to, waive ur family size a | your fee, and m and you are unab | ay do so only le to pay the f | ption only if you are filir if your income is less th ee in installments). If yo Official Form 103B) and | nan 150% of the o ou choose this op | official poverty line tha otion, you must fill out | ıt |
|). | Have you filed for bankruptcy within the | ■ N | o. | | | | | | | |
| | last 8 years? | ☐ Y | es. | | | | | | | |
| | | | District | | | When | Case | e number | | |
| | | | District | | | When | Case | e number | | |
| | | | District | | | When | Case | e number | | _ |
| 10. | Are any bankruptcy cases pending or being | ■ N | 0 | | | | | | | _ |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | □ Y | es. | | | | | | | |
| | | | Debtor | | | | Relati | onship to you | | _ |
| | | | District | | | When | Case | number, if known | n | _ |
| | | | Debtor | | | | | onship to you | | |
| | | | District | | | When | Case | number, if knowr | 1 | |
| 11. | Do you rent your residence? | ■ N | o. Go to li | ine 12. | | | | | | |
| | | □ Y | es. Has yo | ur landlord obt | tained an evictio | n judgment ag | ainst you and do you w | ant to stay in you | ır residence? | |
| | | | | No. Go to line | e 12. | | | | | |
| | | | | Yes. Fill out <i>li</i> bankruptcy pe | | About an Evic | tion Judgment Against \ | You (Form 101A) | and file it with this | |
| | | | | | | | | | | |

Document Page 4 of 50 Case number (if known) Rosanna M Hartman Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

■ No.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Rosanna M Hartman

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Rosanna M Hartman Debtor 1 Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10,000 5**0.001-100.000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Rosanna M Hartman Signature of Debtor 2 Rosanna M Hartman Signature of Debtor 1 Executed on May 18, 2017 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Rosanna M Hartman Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Joseph | Q. Lou | Date | May 18, 2017 |
|----------------|------------------------|---------------|---------------------|
| Signature of | Attorney for Debtor | | MM / DD / YYYY |
| l | 1 | | |
| Joseph Q. | Lou | | |
| Printed name | | | |
| Joseph Q. | Lou, LLC | | |
| Firm name | | | |
| 4001 W. De | evon Ave | | |
| Suite 201 | | | |
| Chicago, I | L 60646 | | |
| | City, State & ZIP Code | | |
| Contact phone | 773-286-8484 | Email address | Court@Josephlou.com |
| 6290082 | | | |
| Par number 9 C | toto | | |

Document Page 8 of 50 Fill in this information to identify your case: Debtor 1 Rosanna M Hartman First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known)

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | 1: Summarize Your Assets | | |
|-----|--|--------------|-------------------------|
| | | Your as | ssets f what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 2,000.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 2,000.00 |
| Par | 2: Summarize Your Liabilities | | |
| | | Your lia | abilities you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 70,665.35 |
| | Your total liabilities | \$ | 70,665.35 |
| Par | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 850.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,040.00 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sch | edules. |
| 7. | Yes What kind of debt do you have? | | |
| | Vous debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for | o noroonal | family or |

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Page 9 of 50 Case number (if known) Debtor 1 Rosanna M Hartman

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. |

1,461.14 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total clai | m |
|--|------------|------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | | Documer | nt Page 10 of 50 | |
|---------------------------------|---|---------------------------------|---|--|
| Fill in this inform | nation to identify your | case and this filing: | | |
| Debtor 1 | Rosanna M Harti | man | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Bar | nkruptcy Court for the: | NORTHERN DISTRICT O | F ILLINOIS | |
| | | | | |
| Case number | | | | ☐ Check if this is an amended filing |
| | | | | |
| Official For | m 106A/B | | | |
| Schedule | A/B: Prop | ertv | | 12/15 |
| n each category, se | parately list and describ | pe items. List an asset only on | ce. If an asset fits in more than one category | |
| nformation. If more | space is needed, attach | | people are filing together, both are equally re. . On the top of any additional pages, write you | |
| Answer every quest | ion. | | | |
| Part 1: Describe E | Each Residence, Buildin | g, Land, or Other Real Estate | You Own or Have an Interest In | |
| . Do you own or h | ave any legal or equitab | e interest in any residence, bu | uilding, land, or similar property? | |
| No. Go to Part | 2. | | | |
| ☐ Yes. Where is | the property? | | | |
| Part 2: Describe | our Vehicles | | | |
| | | | -1 | O la alcala da conscribial a conscribial |
| | | | cles, whether they are registered or not' e G: Executory Contracts and Unexpired Le | |
| 3. Cars, vans, tru | cks, tractors, sport u | tility vehicles, motorcycles | 3 | |
| ■ No | | | | |
| ■ No | | | | |
| | | | | |
| 1. Watercraft, air | craft, motor homes, A | TVs and other recreationa | Il vehicles, other vehicles, and accessor | ies |
| Examples: Boats | s, trailers, motors, pers | onal watercraft, fishing vess | els, snowmobiles, motorcycle accessories | |
| ■ No | | | | |
| ☐ Yes | | | | |
| | | | | |
| 5 Add the dollar | value of the portion | you own for all of your ent | ries from Part 2, including any entries fo | or |
| | | | | |
| Part 3: Describe | our Personal and Hous | sehold Items | | |
| | | table interest in any of the | following items? | Current value of the |
| | | | | portion you own? Do not deduct secured |
| S Household go | ade and furnishings | | | claims or exemptions. |
| | ods and furnishings or appliances, furniture | e, linens, china, kitchenware | | |
| | | | | |
| □ No | ha | | | |
| □ No ■ Yes. Descri | be | | | |

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

Document Page 11 of 50 Case number (if known) Debtor 1 Rosanna M Hartman \$300.00 Misc. Household Electronics 8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$500.00 Used Clothings 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No

■ Yes. Describe.....

Miscellaneous Household Jewelry \$300.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

■ No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$1.500.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

□ No

■ Yes....

Available Cash

\$100.00

Document Page 12 of 50 Case number (if known) Debtor 1 Rosanna M Hartman 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... Chase \$400.00 Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the

| Debtor 1 | Rosanna M Hartman | Document | Page 13 of 50 | ase number (if known) | |
|---------------------------|---|----------------------------------|-----------------------------|----------------------------|--|
| | | | | | portion you own? Do not deduct secured claims or exemptions. |
| 28. Tax re □ No | efunds owed to you | | | | |
| _ | . Give specific information about t | hem, including whether you alr | eady filed the returns an | d the tax years | |
| | | | | 1 | |
| | | No 2016 Tax Refund | | | \$0.0 |
| ■ No | y support nples: Past due or lump sum alimo . Give specific information | ony, spousal support, child supp | oort, maintenance, divord | ce settlement, property | settlement |
| | amounts someone owes you nples: Unpaid wages, disability ins benefits; unpaid loans you r | | nefits, sick pay, vacation | pay, workers' compen | sation, Social Security |
| ☐ Yes | . Give specific information | | | | |
| Exam | sts in insurance policies aples: Health, disability, or life insu | rance; health savings account | (HSA); credit, homeown | er's, or renter's insuran | ce |
| ■ No □ Yes | . Name the insurance company of Company | | Beneficiar | y: | Surrender or refund value: |
| If you some | nterest in property that is due you are the beneficiary of a living trustone has died. | | | currently entitled to rece | ive property because |
| ■ No □ Yes | . Give specific information | | | | |
| Exam ■ No | s against third parties, whether apples: Accidents, employment disp | | | or payment | |
| | . Describe each claim contingent and unliquidated cl | aims of every nature, includi | an counterclaims of th | a dahtar and rights to | sot off claims |
| ■ No | . Describe each claim | anns of every flature, moluum | ig counterclaims of the | c debtor and rights to | set on claims |
| | nancial assets you did not alrea | ady list | | | |
| ■ No □ Yes | . Give specific information | | | | |
| | the dollar value of all of your er Part 4. Write that number here | | | | \$500.00 |
| Part 5: Do | escribe Any Business-Related Prop | erty You Own or Have an Interest | In. List any real estate in | Part 1. | |
| | own or have any legal or equitable to to Part 6. | interest in any business-related | property? | | |

Official Form 106A/B Schedule A/B: Property page 4

 \square Yes. Go to line 38.

Case 17-15850 Doc 1 Filed 05/22/17 Entered 05/22/17 16:59:55 Desc Main Document Page 14 of 50 Case number (if known) Debtor 1 Rosanna M Hartman Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$1,500.00 Part 4: Total financial assets, line 36 58. \$500.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61...

\$2,000.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$2,000.00

\$2,000.00

| Fill in this infor | rmation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|--|
| Debtor 1 | Rosanna M Hartn | nan | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify | the | Property | You | Claim | as | Exempt |
|---------|----------|------|-----------------|------|---------|----|---------------|
| rail i. | iuenini | เมเษ | FIUDELLA | ı ou | Ciaiiii | as | EXCIIID |

| Which set of exemptions are you claiming? Check one only, even if your spouse is filing y |
|---|
|---|

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from | | ount of the exemption you claim eck only one box for each exemption. | Specific laws that allow exemption |
|--|---|-----|---|------------------------------------|
| | Schedule A/B | One | only one box for each exemption. | |
| Used Household Furnitures and Items | \$400.00 | | \$400.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Misc. Household Electronics Line from Schedule A/B: 7.1 | \$300.00 | | \$300.00 | 735 ILCS 5/12-1001(b) |
| Line Horr Schedule A/D. 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Used Clothings Line from Schedule A/B: 11.1 | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(a) |
| Line Holli Schedule Adb. 1111 | | | 100% of fair market value, up to any applicable statutory limit | |
| Miscellaneous Household Jewelry Line from Schedule A/B: 12.1 | \$300.00 | | \$300.00 | 735 ILCS 5/12-1001(b) |
| Line Holli Schedule Adb. 12.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Available Cash Line from Schedule A/B: 16.1 | \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(b) |
| Line Irom Scriedule A/B: 10.1 | | | 100% of fair market value, up to any applicable statutory limit | |

Entered 05/22/17 16:59:55 Document Page 16 of 50 Rosanna M Hartman Case number (if known) Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Checking: Chase** 735 ILCS 5/12-1001(b) \$400.00 \$400.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Filed 05/22/17

Case 17-15850

Yes

Doc 1

Desc Main

| Fill in this infor | rmation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|--|
| Debtor 1 | Rosanna M Hartn | nan | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| | Cas | SC 17-13030 L | Documer | | R of 50 |)9.55 Des | oc mani |
|----------------------|---------------------------------|--------------------------------|--|---|--------------------------------|----------------------|---------------------------|
| Fill in | this inform | ation to identify your | | 1 | 7 (7) (7) | | |
| Debtor | · 1 | Rosanna M Hartm | nan | | | | |
| Dobto | • | First Name | Middle Name | Last Name | | | |
| Debtor | | | | | | | |
| (Spouse | if, filing) | First Name | Middle Name | Last Name | | | |
| United | States Ban | kruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | | |
| Case r | number | | | | | | |
| (if known | | | | | | _ c | heck if this is an |
| | | | | | | a | mended filing |
| ⊃ffici | ial Form | 106E/F | | | | | |
| | | | ho Have Unsecu | rod Claime | | | 12/15 |
| | | | e Part 1 for creditors with PR | | 2 | IONIDDIODITY -I- | |
| Schedul eft. Atta | le D: Crediton sch the Conti | rs Who Have Claims Sec | ired Leases (Official Form 10 ured by Property. If more spa le. If you have no information | ce is needed, copy t | he Part you need, fill it o | ut, number the ent | tries in the boxes on the |
| Part 1: | List All | of Your PRIORITY Un | secured Claims | | | | |
| 1. Do | any creditor | s have priority unsecure | d claims against you? | | | | |
| | No. Go to Pa | rt 2. | | | | | |
| | Yes. | | | | | | |
| Part 2: | List All | of Your NONPRIORIT | Y Unsecured Claims | | | | |
| 3. Do | any creditor | s have nonpriority unsec | cured claims against you? | | | | |
| | No. You have | e nothing to report in this p | art. Submit this form to the coul | rt with your other sche | edules. | | |
| | Yes. | | | | | | |
| uns tha | secured claim | , list the creditor separately | aims in the alphabetical orde y for each claim. For each claim ist the other creditors in Part 3.I | n listed, identify what t | ype of claim it is. Do not lis | t claims already inc | luded in Part 1. If more |
| | | | | | | | Total claim |
| 4.1 | ACL | | Last 4 digits | of account number | 2286 | | \$281.13 |
| | | Creditor's Name | When was the | e debt incurred? | | | |
| | PO Box 2 | is. WI 53227 | Wilen was the | e debt illcurred r | | | - |
| | | eet City State Zlp Code | As of the date | you file, the claim i | s: Check all that apply | | |
| | Who incurr | red the debt? Check one. | | | | | |
| | Debtor 1 | l only | ☐ Contingent | t | | | |
| | Debtor 2 | 2 only | ☐ Unliquidate | ed | | | |
| | Debtor 1 | I and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least | one of the debtors and and | other Type of NONE | PRIORITY unsecured | d claim: | | |
| | ☐ Check i | f this claim is for a com | munity | ans | | | |
| | debt | | | | ration agreement or divorc | e that you did not | |
| | | n subject to offset? | report as prior | • | | 1.14 | |
| | ■ No | | | | g plans, and other similar o | lebts | |
| | ☐ Yes | | Other. Spe | Medical Bil | ls | | _ |

Document Page 19 of 50 Debtor 1 Rosanna M Hartman Case number (if know) \$49,018.00 4.2 American Honda Finance Last 4 digits of account number 1024 Nonpriority Creditor's Name Opened 05/16 Last Active 2170 Point Blvd Ste 100 When was the debt incurred? 11/15/16 Elgin, IL 60123 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other, Specify Repo Vehicle Lease Liability 4.3 **Appelles** Last 4 digits of account number 2924 \$73.62 Nonpriority Creditor's Name When was the debt incurred? 3700 Corporate Drive Suite 240 Columbus, OH 43231 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collecton Agency For US Bank ☐ Yes 4.4 Cap1/neimn Last 4 digits of account number 2172 \$2,161.00 Nonpriority Creditor's Name Opened 03/15 Last Active 26525 N Riverwoods Blvd When was the debt incurred? 1/06/17 Mettawa, IL 60045 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

■ Other. Specify Charge Account

Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Debtor 1 Rosanna M Hartman Case number (if know) \$497.00 4.5 Capital One Bank Usa N Last 4 digits of account number 4787 Nonpriority Creditor's Name Opened 03/08 Last Active 15000 Capital One Dr When was the debt incurred? 11/30/16 Richmond, VA 23238 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.6 **Chase Card** Last 4 digits of account number 2269 \$3,585.00 Nonpriority Creditor's Name Opened 01/14 Last Active Po Box 15298 When was the debt incurred? 9/12/16 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.7 Citi Last 4 digits of account number 9836 \$3.634.00 Nonpriority Creditor's Name Opened 01/14 Last Active Po Box 6241 10/10/16 When was the debt incurred? Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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Case number (if know)

| Debte | or 1 Rosanna M Hartman | | Case number (if know) | | | | | | |
|-------|--|--|--|------------|--|--|--|--|--|
| 4.8 | City of Des Plaines | Last 4 digits of account number | | \$125.00 | | | | | |
| | Nonpriority Creditor's Name | _ | | • | | | | | |
| | 1420 Miner Street | When was the debt incurred? | | | | | | | |
| | Des Plaines, IL 60016 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | | | |
| | Who incurred the debt? Check one. | 7.0 07 0.00 0.00 7 0.0 0.00 0.00 0.00 | er chook an that apply | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | | |
| | Debtor 2 only | | | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Unliquidated☐ Disputed | | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | |
| | debt | Obligations arising out of a sena | ration agreement or divorce that you did not | | | | | | |
| | Is the claim subject to offset? | report as priority claims | and the second of the second state you are not | | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | | |
| | Yes | ■ Other. Specify Parking Fire | nes | | | | | | |
| 4.9 | Comenity Bank/express | Last 4 digits of account number | 9527 | \$383.00 | | | | | |
| 1.0 | Nonpriority Creditor's Name | | | ψ303.00 | | | | | |
| | 4590 E Broad St Columbus, OH 43213 | When was the debt incurred? | Opened 11/13 Last Active 1/13/17 | | | | | | |
| | Number Street City State Zlp Code | | | | | | | | |
| | Who incurred the debt? Check one. | 7.0 07 11.0 44.0 704 11.0, 11.0 014.11.1 | or chook all that apply | | | | | | |
| | ■ Debtor 1 only □ Contingent | | | | | | | | |
| | □ Debtor 2 only □ Unliquidated | | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| | ☐ At least one of the debtors and another | · | | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | |
| | debt | ☐ Obligations arising out of a sepa | | | | | | | |
| | Is the claim subject to offset? | report as priority claims | , | | | | | | |
| | No | Debts to pension or profit-sharing | | | | | | | |
| | ☐ Yes | ■ Other. Specify Charge Acc | | | | | | | |
| 4.1 | | | | | | | | | |
| 0 | Comenity Bank/vctrssec | Last 4 digits of account number | 7996 | \$1,021.00 | | | | | |
| | Nonpriority Creditor's Name | | Opened 05/08 Last Active | | | | | | |
| | Po Box 182789 | When was the debt incurred? | 1/12/17 | | | | | | |
| | Columbus, OH 43218 | | | | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | |
| | debt | | ration agreement or divorce that you did not | | | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | | | |
| | No | Debts to pension or profit-sharing | | | | | | | |
| | ☐ Yes | ■ Other. Specify Charge Acc | Specify Charge Account | | | | | | |

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Debtor 1 Rosanna M Hartman Case number (if know) 4.1 **Dsnb Macys** 0040 \$2.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 02/09 Last Active Po Box 8218 When was the debt incurred? 12/06/16 Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.1 Elan Financial Service 9500 \$1,723.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 05/11 Last Active Po Box 108 9/09/16 When was the debt incurred? Saint Louis, MO 63166 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.1 **Illinois Tollway** \$55.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 5201 When was the debt incurred? Lisle, IL 60532 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Tollway Fines

Document Page 23 of 50 Debtor 1 Rosanna M Hartman Case number (if know) 4.1 \$216.00 Kohls/capone 3816 Last 4 digits of account number Nonpriority Creditor's Name Opened 10/11 Last Active N56 W 17000 Ridgewood Dr When was the debt incurred? 9/01/16 Menomonee Falls, WI 53051 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes Linebarger Goggan Blair & 4.1 \$951.60 4453 5 Last 4 digits of account number Sampson Nonpriority Creditor's Name PO Box 06152 When was the debt incurred? Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney(s) For City of Chicago ☐ Yes 4.1 **Navient** Last 4 digits of account number 4220 Unknown Nonpriority Creditor's Name Opened 01/10 Last Active 123 S Justison St Ste 30 When was the debt incurred? 1/04/17 Wilmington, DE 19801 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No
□ Yes

report as priority claims

Other, Specify

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Educational

Is the claim subject to offset?

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Document Page 24 of 50 Debtor 1 Rosanna M Hartman Case number (if know) 4.1 Nordstrom/td 3066 \$1,234.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 06/11 Last Active 13531 E Caley Ave When was the debt incurred? 1/09/17 Englewood, CO 80111 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.1 **Northland Group Inc** 9669 \$302.00 Last 4 digits of account number 8 Nonpriority Creditor's Name When was the debt incurred? PO Box 129 Thorofare, NJ 08086 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Collecton Agency For Equinox Fitness Club** 4.1 Square, Inc \$5,403.00 Last 4 digits of account number Nonpriority Creditor's Name 1455 Market Street When was the debt incurred? Suite 600 San Francisco, CA 94103 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Liability on Business Debts

Is the claim subject to offset?

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Case number (if know) Debtor 1 Rosanna M Hartman 4.2 Us Dept Of Ed/glelsi 8581 Unknown Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 10/09 Last Active Po Box 7860 When was the debt incurred? 5/22/16 Madison, WI 53707 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.2 Wells Fargo 4332 Unknown Last 4 digits of account number Nonpriority Creditor's Name Opened 07/08 Last Active Po Box 5156 When was the debt incurred? 7/07/16 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify Educational 4.2 Wells Fargo 4331 Unknown Last 4 digits of account number Nonpriority Creditor's Name Opened 07/08 Last Active Po Box 5156 When was the debt incurred? 7/07/16 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

Official Form 106 E/F

☐ Yes

Educational

☐ Other. Specify

Document Page 26 of 50 Debtor 1 Rosanna M Hartman Case number (if know)

| Wells Fargo | Last 4 digits of account number | 4333 | Unknown | | | | |
|--|---|----------------------------------|---------|--|--|--|--|
| Po Box 5156 Sioux Falls, SD 57117 | When was the debt incurred? | Opened 08/09 Last Active 7/07/16 | | | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | | | |
| Debtor 2 only | ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: | | | | | | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | | | | | | | |
| ☐ Check if this claim is for a community | Student loans | | | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |
| Yes | Other. Specify | | | | | | |
| | Educationa | | | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|-----|--|--|--|--|
| 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| | | | | |
| 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | • | 6c. | \$ ——— | 0.00 |
| | | | Ψ ——— | 0.00 |
| ou. | Calculation of the priority and occurred stating. White that almount here. | ou. | Ψ | 0.00 |
| 6e | Total Priority, Add lines 6a through 6d | 6e | ¢ | 0.00 |
| 00. | Total Friendy. Add in loo od till odgil od. | 00. | Ψ | 0.00 |
| | | | | Total Claim |
| 6f. | Student loans | 6f. | \$ | 0.00 |
| | | | · | |
| 60 | Obligations arising out of a separation agreement or divorce that | | | |
| og. | you did not report as priority claims | 6g. | \$ | 0.00 |
| 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| 6i. | Other. Add all other nonpriority unsecured claims. Write that amount | 6i. | \$ | 70,665.35 |
| | nere. | | | |
| 6i. | Total Nonpriority. Add lines 6f through 6i. | 6j. | Q | 70,665.35 |
| | 6b. 6c. 6d. 6e. 6f. 6g. 6h. | 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6d. | 6a. Domestic support obligations 6a. \$ 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ |

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

| Fill in this infor | rmation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|------------|
| Debtor 1 | Rosanna M Hartn | nan | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if |
| | | | | amende |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|--|---|
| 2.1 American Honda Finance | Acct# 315801024 |
| 2170 Point Blvd Ste 100 | Opened 05/16 |
| Elgin, IL 60123 | Lease |

| | | Docume | nt Page 28 d | of 50 | |
|---------------------------|--|-------------------------------|-----------------------|---|------------------------------------|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Rosanna M Hartn | nan | | | |
| 200101 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filin | ng) First Name | Middle Name | | | |
| United Stat | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| | | | | | |
| Case numb (if known) | oer | | | ☐ Check if thi | e ie an |
| , | | | | amended fi | |
| | | | | | 3 |
| Official | l Form 106H | | | | |
| Sched | ule H: Your Cod | ebtors | | | 12/15 |
| 50110 4 | dio III. I odi oda | | | | |
| | , | , , | | as a codebtor. | |
| ■ No □ Yes | | | | | |
| | | | | | nclude |
| ■ No. | Go to line 3. | | | | |
| ☐ Yes | . Did your spouse, former spou | use, or legal equivalent live | with you at the time? | | |
| | | | | | |
| in line Form out Co | 2 again as a codebtor only i | f that person is a guaran | tor or cosigner. Make | sure you have listed the creditor on Schedu | ile D (Official edule G to fill |
| | Name, Number, Street, City, State and Zi | P Code | | Check all schedules that apply: | re the debt |
| 3.1 | | | | ☐ Schedule D. line | |
| | Name | | | | |
| | | | | | |
| - | Number Street | | | <u> </u> | |
| | City | State | ZIP Code | | |
| | | | | | |
| 3.2 | | | | Cabadula D. lin- | |
| | Name | | | _ _ | |
| | | | | | |
| - | 2 | | | | |
| | Number Street | State | ZIP Code | | |

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| | | | | | | ı | | | |
|--------------------|---|--|--|---------------------|----------------|-------------------------------------|---------------------------|---------------------------|-----------------|
| | in this information to identify your | | | | | | | | |
| Del | btor 1 Rosanna N | l Hartman | | | | | | | |
| | btor 2 | | | | _ | | | | |
| Uni | ited States Bankruptcy Court for th | e: NORTHERN DISTRIC | CT OF ILLINOIS | | | | | | |
| | se number nown) | | - | | | | ded filing nent showir | ng postpetition | |
| 0 | fficial Form 106I | | | | | MM / DD/ | YYYY | | |
| S | chedule I: Your Ind | come | | | | | | | 12/1 |
| sup spo atta | as complete and accurate as posphyling correct information. If you are separated and you have a separate sheet to this form Describe Employmen | u are married and not filing wi our spouse is not filing wi . On the top of any addition | ng jointly, and your ith you, do not inclu | spouse ide infor | is liv mati | ing with you, in on about your s | clude infor | mation about ore space is | your needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debto | 2 or non-f | iling spouse | |
| | If you have more than one job, | Employment status | ■ Employed | | | ☐ Em | oloyed | | |
| | attach a separate page with information about additional | Linployment status | □ Not employed | | | ☐ Not | | | |
| | employers. | Occupation | Self-Employed | Makeup | Art | ist | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | | | | | | |
| | | How long employed the | here? Less th | nan a ye | ar | | | | |
| Pai | rt 2: Give Details About Mo | onthly Income | | | | | | | |
| | imate monthly income as of the use unless you are separated. | date you file this form. If y | you have nothing to r | eport for | any | ine, write \$0 in th | e space. In | clude your noi | n-filing |
| - | ou or your non-filing spouse have n e space, attach a separate sheet t | | ombine the informatio | n for all e | emplo | oyers for that per | son on the I | ines below. If | you need |
| | | | | | | For Debtor 1 | | ebtor 2 or ing spouse | |
| 2. | List monthly gross wages, sal deductions). If not paid monthly | | | 2. | \$ | 0.00 | \$ | N/A | |
| 3. | Estimate and list monthly ove | rtime pay. | | 3. | +\$ | 0.00 | _ +\$ | N/A | |
| 4. | Calculate gross Income. Add | line 2 + line 3. | | 4. | \$ | 0.00 | \$ | N/A | |

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| Deb | tor 1 | Rosanna M Hartman | | Ca | ase number (if kn | nown) | | | | |
|-----|---------------|--|------------|------|-------------------|-------|----------|---------------------|--------------------|--------|
| | | | | F | For Debtor 1 | | | Debtor -filing s | | |
| | Сор | y line 4 here | 4. | 9 | | .00 | \$ | | N/A | |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | . \$ | 6 0 | .00 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | . 9 | 60 | .00 | \$ | | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | . 9 | 0 | .00 | \$ | | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | . \$ | 0 | .00 | \$ | | N/A | |
| | 5e. | Insurance | 5e. | . 9 | 0 | .00 | \$ | | N/A | |
| | 5f. | Domestic support obligations | 5f. | 9 | 0 | .00 | \$ | | N/A | |
| | 5g. | Union dues | 5g. | . 9 | 0 | .00 | \$ | | N/A | |
| | 5h. | Other deductions. Specify: | _ 5h. | + \$ | 0 | .00 | + \$ | | N/A | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | | .00 | \$ | | N/A | |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | | .00 | \$ | | N/A | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | . 9 | 050 | . 00 | \$ | | N/A | |
| | 8b. | Interest and dividends | оа. 8b. | | | 0.00 | \$ | | N/A N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | | | 0.00 | \$ \$ | | N/A | |
| | 8d. | Unemployment compensation | 8d. | . 9 | 6 | 0.00 | \$ | - | N/A | |
| | 8e. | Social Security | 8e. | . 9 | | 0.00 | \$ | | N/A | |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | 8f. 8g. | . 9 | | 0.00 | \$ | | N/A N/A | |
| | 8h. | Other monthly income. Specify: | 8h. | | | 0.00 | · — | | N/A | |
| | 011. | | _ ``` | | | | ` | | N/A | 1 |
| 9. | Add | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 850 | 0.00 | \$ | | N/A | |
| 10. | Cald | culate monthly income. Add line 7 + line 9. | 10. | \$ | 850.00 | + \$ | | N/A | = \$ | 850.00 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 1 | · — | 300.00 | ' - | | | ' — | |
| 11. | Inclu othe | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify: | depe | | | | , | chedule 11. | | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certainies | | | | | | 12. | \$ | 850.00 |
| 13. | Do | you expect an increase or decrease within the year after you file this form | ? | | | | | ' | Combin- monthly | |
| | | No. | - | | | | | | | |
| | _ | Yes Eynlain: | | | | | | | | |

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| | | | | | | • | | | | | | |
|----------------------------|---------------------------------|------------------------------------|--------------------------|---|--|------------|---------------------------------------|-------------|-------------------------------|--|--|--|
| Fill | in this informa | tion to identify yo | our case: | | | | | | | | | |
| Debtor 1 Rosanna M Hartman | | | | | | | Check if this is: An amended filing | | | | | |
| Deb | tor 2 | | | | | | | • | ving postpetition chapter | | | |
| ! | ouse, if filing) | | | | | | | | the following date: | | | |
| Unit | ed States Bankr | ruptcy Court for the | : NORTH | ERN DISTRICT OF ILLIN | OIS | | MM / D | D / YYYY | | | | |
| Cas | e number | | | | | | | | | | | |
| (If kı | nown) | | | | | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | | | | | |
| Sc | chedule | J: Your | Exper | ises | | | | | 12/1 | | | |
| Be a | as complete a | and accurate as | s possible eded, atta | If two married people ar ch another sheet to this | | | | | | | | |
| Par | | ribe Your House | ehold | | | | | | | | | |
| 1. | Is this a joir | nt case? | | | | | | | | | | |
| | ■ No. Go to | line 2. | | | | | | | | | | |
| | ☐ Yes. Doe | es Debtor 2 live | in a separ | ate household? | | | | | | | | |
| | □N | 0 | | | | | | | | | | |
| | □ Y | es. Debtor 2 mus | st file Offici | al Form 106J-2, Expenses | for Separate House | ehold of D | ebtor 2. | | | | | |
| 2. | Do you have | e dependents? | ■ No | | | | | | | | | |
| | Do not list Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dep age | endent's | Does dependent live with you? | | | |
| | Do not state | | | | | | | | □ No | | | |
| | dependents | names. | | | | | | | ☐ Yes | | | |
| | | | | | | | | | □ No □ Yes | | | |
| | | | | | | | | | ☐ Yes | | | |
| | | | | | | | | | ☐ Yes | | | |
| | | | | | - | | | | □ No | | | |
| | | | | | | | | | ☐ Yes | | | |
| 3. | | penses include | . • | No | | | | | | | | |
| | | f people other t d your depende | | Yes | | | | | | | | |
| | | a your acpende | | | | | | | | | | |
| | | ate Your Ongoi | | | | | | | | | | |
| exp | | | | uptcy filing date unless y y is filed. If this is a supp | | | | | | | | |
| | | | | government assistance i | | | | | | | | |
| | value of sucl ficial Form 10 | | d have ind | cluded it on Schedule I: Y | our Income | | | Your exp | enses | | | |
| (| | , | | | | | | | | | | |
| 4. | | or home owners | | ses for your residence. In | nclude first mortgag | | \$ | | 200.00 | | | |
| | If not includ | led in line 4: | | | | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | | 0.00 | | | |
| | | rty, homeowner's | | | | 4b. | · · · · · · · · · · · · · · · · · · · | | 0.00 | | | |
| | | | • | ipkeep expenses | | 4c. | | | 0.00 | | | |
| F | | owner's associat | | | mo oquity locate | 4d. | \$ \$ | | 0.00 | | | |
| 5. | Auditional | nortyaye payin | enta iui yo | our residence, such as ho | me equity loans | Э. | φ | | 0.00 | | | |

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| Debtor 1 | | Rosanna | a M Hartman | Case r | numl | ber (if known) | |
|----------|---------|----------------|---|------------------------------|------------|----------------|------------------------------|
| 6. | Utiliti | ies: | | | | | |
| ٥. | 6a. | | , heat, natural gas | 6 | ŝа. | \$ | 0.00 |
| | 6b. | Water, sev | wer, garbage collection | 6 | 6b. | \$ | 0.00 |
| | 6c. | | e, cell phone, Internet, satellite, and cable service | s (| 6c. | \$ | 110.00 |
| | 6d. | Other. Spe | ecify: | 6 | 6d. | \$ | 0.00 |
| 7. | Food | | ekeeping supplies | | 7. | \$ | 350.00 |
| 8. | | | children's education costs | | 8. | \$ | 0.00 |
| 9. | Cloth | ning, laund | ry, and dry cleaning | | 9. | \$ | 30.00 |
| 10. | Perso | onal care p | products and services | 1 | 10. | \$ | 30.00 |
| | | - | ntal expenses | 1 | 11. | \$ | 20.00 |
| 12. | Trans | | | | | | |
| | Do no | ot include ca | ar payments. | | 12. | \$ | 200.00 |
| 13. | Ente | rtainment, | clubs, recreation, newspapers, magazines, an | d books | 13. | \$ | 0.00 |
| 14. | Char | itable cont | ributions and religious donations | 1 | 14. | \$ | 0.00 |
| 15. | Insur | | | | | | |
| | | | nsurance deducted from your pay or included in lin | | | | |
| | | Life insura | | | 5a. | · | 0.00 |
| | 15b. | Health ins | urance | | 5b. | | 0.00 |
| | 15c. | Vehicle in | surance | 15 | 5c. | \$ | 100.00 |
| | 15d. | Other insu | ırance. Specify: | 15 | 5d. | \$ | 0.00 |
| 16. | | | clude taxes deducted from your pay or included i | | | | |
| | Spec | , | | | 16. | \$ | 0.00 |
| 17. | | | ease payments: | 4- | - - | • | |
| | | | ents for Vehicle 1 | | 7a. | · | 0.00 |
| | | | ents for Vehicle 2 | | 7b. | · | 0.00 |
| | | Other. Spe | | | 7c. | · | 0.00 |
| | | Other. Spe | • | | 7d. | \$ | 0.00 |
| 18. | | | of alimony, maintenance, and support that yo | | 18. | \$ | 0.00 |
| 10 | | | your pay on line 5, <i>Schedule I, Your Income</i> (C s you make to support others who do not live | iniolari onin rootj. | 10. | ¢ | 0.00 |
| 19. | Spec | | s you make to support others who do not live | • | 19. | Ψ | 0.00 |
| 20 | | , | erty expenses not included in lines 4 or 5 of the | | | ur Income | |
| 20. | | | s on other property | | Da. | | 0.00 |
| | | Real estat | | | Ob. | | 0.00 |
| | | | homeowner's, or renter's insurance | | 0c. | | 0.00 |
| | | | nce, repair, and upkeep expenses | | od. Od. | · · | 0.00 |
| | | | er's association or condominium dues | | De. | • | 0.00 |
| 21 | | r: Specify: | or a decodiation of condensition date | | | +\$ | 0.00 |
| ۷١. | Otile | a. Specify. | | | ۷۱۰ ا | -Ψ | 0.00 |
| 22. | Calc | ulate your i | monthly expenses | | | | |
| | 22a. | Add lines 4 | through 21. | | | \$ | 1,040.00 |
| | 22b. | Copy line 2: | 2 (monthly expenses for Debtor 2), if any, from O | ficial Form 106J-2 | | \$ | |
| | 22c. / | Add line 22a | a and 22b. The result is your monthly expenses. | | | \$ | 1,040.00 |
| | | | , , , | | | | |
| 23. | | • | monthly net income. | | _ | • | |
| | | | 12 (your combined monthly income) from Schedu | | 3a. | · | 850.00 |
| | 23b. | Copy your | monthly expenses from line 22c above. | 23 | 3b. | -\$ | 1,040.00 |
| | 00 | 0.1. | | | | | |
| | 23c. | | our monthly expenses from your monthly income | 2: | 3c. | \$ | -190.00 |
| | | ine result | is your monthly net income. | 20 | ٠., | · | |
| 24. | Do ve | ou expect a | an increase or decrease in your expenses with | in the vear after you file t | this | form? | |
| | For ex | xample, do yo | ou expect to finish paying for your car loan within the yea | | | | ase or decrease because of a |
| | modifi | ication to the | terms of your mortgage? | | | | |
| | ■ No | 0. | | | | | |
| | □Y€ | es. | Explain here: | | | | |

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| Fill in this infor | mation to identify your | case. | | | |
|---|--|--------------------------|------------------------------|----------------------------|---|
| | | ouse. | | | |
| Debtor 1 | Rosanna M Hartr | nan | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| , , | | | | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| | | | | | |
| Official For | m 106Dec | | | | |
| | | امينامانينا مم | Dahtaria Cah | مماييامم | |
| Declara | tion About a | an individual | Debtor's Sch | eaules | 12/15 |
| | y or property by fraud i | | | | ement, concealing property, or |
| | 8 U.S.C. 99 152, 1341, 1 | 1519, and 3571. | auptoy ouse our result in i | | 00, or imprisonment for up to 20 |
| Sig | 8 U.S.C. §§ 152, 1341, ² | I519, and 3571. | auptoy oude our result in r | | 00, or imprisonment for up to 20 |
| | n Below | | ney to help you fill out bar | | 00, or imprisonment for up to 20 |
| | n Below | | | | 00, or imprisonment for up to 20 |
| Did you pa | n Below | | | kruptcy forms? Attach Ban | kruptcy Petition Preparer's Notice, |
| Did you pa | n Below ny or agree to pay some | | | kruptcy forms? Attach Ban | |
| Did you pa | n Below ny or agree to pay some Name of person | eone who is NOT an attor | | Attach Ban Declaration | kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119) |
| Did you pa No Yes. Under penathat they ar | n Below ay or agree to pay some Name of person alty of perjury, I declare | eone who is NOT an attor | ney to help you fill out bar | Attach Ban Declaration | kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119) |

Date _____

Date May 18, 2017

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| Fill | in this inform | ation to identify you | r case: | | | | | | | | |
|-------------------|----------------------------|---|----------------------|-------------------------------|------------|--|--|----------|---|--|--|
| De | btor 1 | Rosanna M Hart | man | | | | | | | | |
| _ | h. (0 | First Name | Mic | Idle Name | | Last Name | | | | | |
| | btor 2 ouse if, filing) | First Name | Mic | Idle Name | | Last Name | | | | | |
| Un | ited States Bar | nkruptcy Court for the: | NORTH | ERN DISTRICT | OF ILLII | NOIS | | | | | |
| | | | | | | | | | | | |
| | se number nown) | | | | | | | _ | neck if this is an nended filing | | |
| | | | | | | | | | | | |
| Of | ficial Fo | m 107 | | | | | | | | | |
| St | atement | of Financial | Affairs | for Indivi | duals | s Filing for E | Bankruptcy | | 4/10 | | |
| info nun | rmation. If months | | attach a s stion. | eparate sheet to | this fo | rm. On the top of ar | e equally responsible ny additional pages, w | | | | |
| 1. | What is your | current marital statu | ıs? | | | | | | | | |
| | ☐ Married | | | | | | | | | | |
| | ■ Not mar | ried | | | | | | | | | |
| 2. | During the la | During the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | | |
| | ■ No | | | | | | | | | | |
| | _ | all of the places you l | ived in the | last 3 years. Do n | ot inclu | de where you live no | W. | | | | |
| | Debtor 1 Pri | or Address: | | Dates Debtor 1 lived there | | Debtor 2 Prior A | ddress: | | Dates Debtor 2 lived there | | |
| 3. stat | | | | | | | nity property state or Rico, Texas, Washingto | | ? (Community property isconsin.) | | |
| | ■ No | | | | | | | | | | |
| | ☐ Yes. Ma | ke sure you fill out <i>Scl</i> | nedule H: Y | our Codebtors (C | official F | orm 106H). | | | | | |
| Pa | rt 2 Explain | n the Sources of You | r Income | | | | | | | | |
| 4. | Fill in the tota | e any income from en I amount of income yo g a joint case and you | u received | from all jobs and | all busir | nesses, including par | | us calen | dar years? | | |
| | □ No | | | | | | | | | | |
| | Yes. Fill | in the details. | | | | | | | | | |
| | | | Debtor 1 | | | | Debtor 2 | | | | |
| | | | | of income that apply. | (bef | ss income ore deductions and usions) | Sources of income Check all that apply | | Gross income (before deductions and exclusions) | | |
| | | of current year until d for bankruptcy: | ■ Wages bonuses, | s, commissions, tips | | \$9,267.00 | ☐ Wages, commissionuses, tips | sions, | | | |
| | | | ■ Opera | ting a business | | | ☐ Operating a busing | iness | | | |

Official Form 107

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Case number (if known) Debtor 1 Rosanna M Hartman

| | | | | | Debtor 1 | | Debtor 2 | | | |
|--|---------------------------------|--|--|--|---|---|--|--|---|--|
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of ind Check all that a | | Gross income (before deductions and exclusions) | | | | |
| For last calendar year: (January 1 to December 31, 2016) | | | | 31, 2016) | ☐ Wages, commissions, bonuses, tips | \$0.00 | ☐ Wages, combonuses, tips | ☐ Wages, commissions, bonuses, tips | | |
| | | | | | Operating a business | | ☐ Operating a | business | | |
| For the calendar year before that: (January 1 to December 31, 2015) | | | | | ■ Wages, commissions, bonuses, tips | \$8,595.00 | bonuses, tips | | | |
| | | | | | ☐ Operating a business | | ☐ Operating a | business | | |
| 5. | Include and oth winning List ea | e inco her p gs. If ach so lo | ome regardl Jublic benefi Jyou are filir | ess of wheth t payments; ng a joint cas ne gross inco | e during this year or the two er that income is taxable. Exa pensions; rental income; inter e and you have income that y me from each source separat | imples of other income are est; dividends; money collow you received together, list in | e alimony; child supp ected from lawsuits; t only once under D | royalties; and ebtor 1. | | |
| | | | | | Debtor 1 | | Debtor 2 | | | |
| | | | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of inc Describe below | | Gross income (before deductions and exclusions) | |
| Pa | rt 3: | List | Certain Pay | ments You | Made Before You Filed for I | Bankruptcy | | | | |
| 6. | □ N | lo. | Neither De individual p During the I No. Yes * Subject t Debtor 1 o | btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include o adjustment r Debtor 2 o | s debts primarily consumer ebtor 2 has primarily consumer personal, family, or household re you filed for bankruptcy, diestach creditor to whom you paireditor. Do not include payment payments to an attorney for the on 4/01/19 and every 3 years or both have primarily consumer you filed for bankruptcy, diestach 2 has primarily consumer you filed for bankruptcy, diestach 2 has primarily consumer you filed for bankruptcy, diestach 2 has primarily consumer you filed for bankruptcy, diestach 2 has primarily consumer you filed for bankruptcy, diestach 2 has primarily consumer you filed for bankruptcy, diestach 2 has primarily consumer you filed for bankruptcy, diestach 2 has primarily consumer you filed for bankruptcy, diestach 2 has primarily consumer you filed for bankruptcy, diestach 2 has primarily consumer you filed for bankruptcy, diestach 2 has primarily consumer you filed for bankruptcy, diestach 2 has primarily consumer you filed for bankruptcy, diestach 2 has primarily consumer you filed for bankruptcy, diestach 2 has primarily consumer you filed for bankruptcy, diestach 2 has primarily consumer you filed for bankruptcy, diestach 2 has primarily consumer you filed for bankruptcy, diestach 2 has primarily consumer you filed for bankruptcy, diestach 2 has primarily consumer you filed for bankruptcy. | d you pay any creditor a to d a total of \$6,425* or more ts for domestic support ob his bankruptcy case. s after that for cases filed of mer debts. | e in one or more pay ligations, such as cl | ore? yments and the nild support a of adjustment. | ne total amount you nd alimony. Also, do | |
| | | | ■ No. □ Yes | include pay | each creditor to whom you pai ments for domestic support ol this bankruptcy case. | | | | | |
| | Credi | itor's | Name and | Address | Dates of payme | nt Total amount | Amount you still owe | Was this p | payment for | |

Page 36 of 50 Case number (if known) Document Debtor 1 Rosanna M Hartman

| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No | | | | | | | | | |
|-----|--|---------------------------------------|----------------------|----------------------|------------------------------|--|--|--|--|--|
| | Yes. List all payments to an insider. | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment | | | | |
| 8. | Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. | | | | | | | | | |
| | ■ No □ Yes. List all payments to an insider | | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment ditor's name | | | | |
| Dar | t 4: Identify Legal Actions, Repossession | ne and Foreclosures | | | | | | | | |
| 9. | Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title | | | | | rt or custody | | | | |
| | Case number | | | | | | | | | |
| 10. | Within 1 year before you filed for bankrupte. Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address | | | oreclosed, garni | | d, seized, or levied? Value of the property | | | | |
| 11. | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. | | | | | | | | | |
| | Creditor Name and Address | Describe the action the creditor took | | | Date action was Amount taken | | | | | |
| | taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of credicourt-appointed receiver, a custodian, or another official? ■ No □ Yes | | | | | | | | | |
| Par | | | | | | | | | | |
| 13. | Within 2 years before you filed for bankrup■ No□ Yes. Fill in the details for each gift. | tcy, did you give any gifts | s with a total value | of more than \$60 | 00 per person | ? | | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | | Date the ç | s you gave gifts | Value | | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | | | |

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| De | btor 1 Rosanna M Hartman | | Case num | ber (if known) | |
|-----|--|---------|--|-----------------------------------|--------------------------|
| | | | | | |
| 14. | Within 2 years before you filed for banks No Yes. Fill in the details for each gift or o | | did you give any gifts or contributions with a ution. | total value of more than | \$600 to any charity? |
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod | total | Describe what you contributed | Dates you contributed | Value |
| Pa | rt 6: List Certain Losses | | | | |
| 15. | Within 1 year before you filed for bankru or gambling? | iptcy c | or since you filed for bankruptcy, did you lose a | anything because of thef | t, fire, other disaster, |
| | No Yes. Fill in the details. | | | | |
| | Yes. Fill in the details. Describe the property you lost and | Desc | ribe any insurance coverage for the loss | Date of your | Value of property |
| | how the loss occurred | Includ | de the amount that insurance has paid. List pendir ance claims on line 33 of Schedule A/B: Property. | ng loss | lost |
| Pai | rt 7: List Certain Payments or Transfer | s | | | |
| | No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Not Not Not Not Not Not Not Not Not | You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | Joseph Q. Lou, LLC 4001 W. Devon Ave Suite 201 Chicago, IL 60646 Court@Josephlou.com | ·ou | Attorney Fees | 2017 | \$1,035.00 |
| | Summit Financial Education 4800 E Flower St Tucson, AZ 85712 www.summitfe.org | | Credit Counseling Course | 2017 | \$15.00 |
| 17. | Within 1 year before you filed for bankru promised to help you deal with your cre Do not include any payment or transfer tha | ditors | | ay or transfer any prope | rty to anyone who |
| | Yes. Fill in the details. | | | | |
| | Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was | Amount of payment |

made

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Debtor 1 Rosanna M Hartman

| 8. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. \[\sum_{\text{No}} \text{No} \] | | | | | | |
|-----|--|--|---------------------------|------------|---|---|--|
| | Yes. Fill in the details. | | | | | | |
| | Person Who Received Transfer Address | property transferred p | | payme | ibe any property or ents received or debts n exchange | Date transfer was made | |
| | Person's relationship to you | elationship to you | | | | | |
| | Alexandra Stein 2127 Nimitz Dr. Des Plaines, IL 60018 | 2008 Mitsubishi private party for \$3,000 | | \$3,00 | 0 | About a year ago | |
| | Buyer | | | | | | |
| 9. | Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No ☐ Yes. Fill in the details. | | y property to a s | elf-settle | d trust or similar device o | of which you are a | |
| | Name of trust Description and value of the property transferred | | | | Date Transfer was | | |
| | made | | | | | | |
| Par | t 8: List of Certain Financial Accounts, Instru | ıments, Safe Deposit | Boxes, and Stor | age Unit | s | | |
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. | | | | | | |
| | ■ No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | | ast 4 digits of ecount number | Type of accoun instrument | it or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | i es. Fili ili tile detalis. | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe 1 | the contents | Do you still have it? | |
| 22. | Have you stored property in a storage unit or p | lace other than your | home within 1 y | ear befor | e you filed for bankrupto | y? | |
| | ■ No | | | | | | |
| | Yes. Fill in the details. | | | | | | |
| | | | | | | _ | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, S State and ZIP Code) | | Describe 1 | the contents | Do you still have it? | |

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Debtor 1 Rosanna M Hartman

| Pai | t 9: Identify Property You Hold or Control for S | Someone Else | | | | |
|-----|---|---|-------|-------------------------------------|-----------------------|--|
| 23. | . Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. | | | | | |
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | De | scribe the property | Value | |
| Pa | t 10: Give Details About Environmental Informa | ation | | | | |
| For | the purpose of Part 10, the following definitions | apply: | | | | |
| | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | | | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposal | | law, | whether you now own, operate, o | or utilize it or used | |
| | Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s | | s wa | ste, hazardous substance, toxic s | substance, | |
| Rep | ort all notices, releases, and proceedings that yo | ou know about, regardless of wher | n the | ey occurred. | | |
| 24. | Has any governmental unit notified you that you | ı may be liable or potentially liable | unc | der or in violation of an environme | ental law? | |
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | d | Environmental law, if you know it | Date of notice | |
| 25. | Have you notified any governmental unit of any | release of hazardous material? | | | | |
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | d | Environmental law, if you know it | Date of notice | |
| 26. | Have you been a party in any judicial or adminis | , | iron | mental law? Include settlements a | and orders. | |
| | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Na | ture of the case | Status of the case | |
| Pai | t 11: Give Details About Your Business or Con | nections to Any Rusiness | | | | |
| Та | | • | | | | |
| 27. | Within 4 years before you filed for bankruptcy, c | lid you own a business or have ar | ıy of | f the following connections to any | business? | |
| | ☐ A sole proprietor or self-employed in a t | rade, profession, or other activity, | eith | ner full-time or part-time | | |
| | ☐ A member of a limited liability company | (LLC) or limited liability partnersh | ip (L | LLP) | | |
| | ☐ A partner in a partnership | | | | | |
| | ☐ An officer, director, or managing execut | ive of a corporation | | | | |

 $\hfill\square$ An owner of at least 5% of the voting or equity securities of a corporation

Case 17-15850 Doc 1 Filed 05/22/17 Entered 05/22/17 16:59:55 Page 40 of 50 Document Rosanna M Hartman Case number (if known) Debtor 1 No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Rosanna M Hartman

Signature of Debtor 2 Rosanna M Hartman Signature of Debtor 1 Date Date May 18, 2017

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Debtor 1 Rosanna M Hartman First Name | | | Doodi | nent rage is a se | |
|--|-------------------------|-----------------------------------|-------------------|--|---|
| Pies Name Middle Name Last Name Debor 2 Pies Name Middle Name Last Name Debor 2 Pies Name Middle Name Last Name Description of property Description of | Fill in this infor | mation to identify your case: | | | |
| Pint Name | Debtor 1 | Rosanna M Hartman | | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Check if this is an amended filling Official Form 108 Statement of Intention for Individuals Filling Under Chapter 7 12/15 If you are an individual filling under chapter 7, you must fill out this form if: Creditors have claims secured by your property, or 12/15 12/15 | | | Middle Name | Last Name | |
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| property | | | | Retain the property and enter into a | ☐ Yes |
| — retain the property and [explain]. | | | | | |
| | property securing debt: | : | | ☐ Retain the property and [explain]: | |

Official Form 108

Creditor's

Creditor's

Description of

securing debt:

name:

property

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ Surrender the property.

☐ Retain the property and redeem it.

 $\hfill\square$ Retain the property and enter into a

☐ Retain the property and [explain]:

Reaffirmation Agreement.

☐ No

☐ Yes

☐ No

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| Debtor 1 | Rosanna M Hartman | Case number (if k | known) |
|---|--|---|---|
| name: Descrip propert securin | у | □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ☐ Yes |
| For any ui n the info | rmation below. Do not list real estate I | y Leases you listed in Schedule G: Executory Contracts and Unex eases. Unexpired leases are leases that are still in effec y lease if the trustee does not assume it. 11 U.S.C. § 36 | ct; the lease period has not yet ended. |
| Describe | your unexpired personal property leas | ses | Will the lease be assumed? |
| Lessor's r Description Property: | name: on of leased | | □ No |
| Lessor's r Description Property: | name: on of leased | | □ No |
| Lessor's r Description Property: | name: on of leased | | □ No |
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| Lessor's r Description Property: | name: on of leased | | □ No |
| Lessor's r Description Property: | name: nn of leased | | □ No □ Yes |
| Under per property t X /s/ F Ros | Sign Below nalty of perjury, I declare that I have income that is subject to an unexpired lease. Rosanna M Hartman sanna M Hartman ature of Debtor 1 | dicated my intention about any property of my estate the X Signature of Debtor 2 | |
| Date | May 18, 2017 | Date | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-15850 Doc 1 Filed 05/22/17 Entered 05/22/17 16:59:55 Desc Main Document Page 47 of 50

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In re | Rosanna M Hartman | | Case No. | | | | |
|--------|---|---|--|-----------------------|-----------------|--|--|
| | | Debtor(s) | Chapter | 7 | | | |
| | DISCLOSURE OF COMPEN | SATION OF ATTO | RNEY FOR D | EBTOR(S) | | | |
| (| Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of | of the petition in bankruptcy | , or agreed to be paid | d to me, for services | | | |
| | For legal services, I have agreed to accept | | \$ | 1,035.00 | | | |
| | Prior to the filing of this statement I have received | | | 1,035.00 | | | |
| | Balance Due | | | 0.00 | | | |
| 2. | The source of the compensation paid to me was: | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | |
| 3. | The source of compensation to be paid to me is: | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | |
| 4. | ■ I have not agreed to share the above-disclosed compet | nsation with any other person | n unless they are men | nbers and associates | of my law firm. | | |
| | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name | | | | law firm. A | | |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | | | |
| l o | a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, stater c. Representation of the debtor at the meeting of creditors d. [Other provisions as needed] Preparation and filing of reaffirmation against | ment of affairs and plan which s and confirmation hearing, a | h may be required; and any adjourned he | - | ıkruptcy; | | |
| 6. l | By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any disc any other adversary proceeding or any m | hargeability actions, jud | licial lien avoidan | ces, relief from st | ay actions, | | |
| | | CERTIFICATION | | | | | |
| | I certify that the foregoing is a complete statement of any pankruptcy proceeding. | agreement or arrangement fo | or payment to me for | representation of the | debtor(s) in | | |
| M | May 18, 2017 | /s/ Joseph Q. Lo | u | | | | |
| _ | Date Josep | | 290082 | | | | |
| | | Signature of Attorn Joseph Q. Lou, I | | | | | |
| | | 4001 W. Devon A | | | | | |
| | | Suite 201 | 10 | | | | |
| | | Chicago, IL 6064 | i6 ax: 773-286-8485 | | | | |
| | | Court@Josephic | | | | | |
| | | Name of law firm | | | | | |

United States Bankruptcy Court Northern District of Illinois

| In re | Rosanna M Hartman | | Case No. | | | | |
|-------|---|---|----------------------|-----------------------|--|--|--|
| | | Debtor(s) | Chapter 7 | | | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | | | |
| | | Number of | Creditors: | 21 | | | |
| | The above-named Debtor(s (our) knowledge. |) hereby verifies that the list of credit | ors is true and corr | ect to the best of my | | | |
| | | | | | | | |

ACL PO Box 27901 West Allis, WI 53227

American Honda Finance 2170 Point Blvd Ste 100 Elgin, IL 60123

Appelles 3700 Corporate Drive Suite 240 Columbus, OH 43231

Cap1/neimn 26525 N Riverwoods Blvd Mettawa, IL 60045

Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238

Chase Card Po Box 15298 Wilmington, DE 19850

Citi Po Box 6241 Sioux Falls, SD 57117

City of Des Plaines 1420 Miner Street Des Plaines, IL 60016

Comenity Bank/express 4590 E Broad St Columbus, OH 43213

Comenity Bank/vctrssec Po Box 182789 Columbus, OH 43218

Dsnb Macys Po Box 8218 Mason, OH 45040 Elan Financial Service Po Box 108 Saint Louis, MO 63166

Illinois Tollway P.O. Box 5201 Lisle, IL 60532

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Linebarger Goggan Blair & Sampson PO Box 06152 Chicago, IL 60606

Navient 123 S Justison St Ste 30 Wilmington, DE 19801

Nordstrom/td 13531 E Caley Ave Englewood, CO 80111

Northland Group Inc PO Box 129 Thorofare, NJ 08086

Square, Inc 1455 Market Street Suite 600 San Francisco, CA 94103

Us Dept Of Ed/glelsi Po Box 7860 Madison, WI 53707

Wells Fargo Po Box 5156 Sioux Falls, SD 57117